

Capacity Building Initiatives Due June 30, 2024

*Submit Deliverable if Submitted Invoice #1 and Received Start-Up Funds to Avoid Recoupment
Submit Invoice #2 and the Deliverable if Start-Up Funds Not Received*

| Category # | Category | Pre-requisite(s) | Deliverable |
|-------------|--|--|---|
| WF | Workforce Development: 1A-1 Required to participate in any Workforce Development Categories | | |
| 1C-1 | Sustainability Plan | 1A-1 Agency Survey | Submit 1C- Sustainability Plan Template and Invoice 2 if Start Up Funds not claimed. |
| R95 | Access to Care: Removed Reaching the 95% (R95) Capacity Building Prerequisites (2C-2, 2D-1, 2D-2) | | |
| 2B-2 | Field Based Services (FBS) Verified Claims | 2B-1 –FBS Approved executed MOUs | Agencies approved for providing FBS must submit claims using the appropriate place of service codes as outlined in Field Based Services Standards and Practices. Agencies experiencing technical difficulties with submitting claims may be asked to submit documentation to verify new admissions through FBS. |
| 2C-2 | 30–60-day period Outreach / Engagement Verified Claims | 2C-1 Engagement Policy Approved | Initial engagement authorizations are verified based upon the dedicated field in the authorization request form which indicates that the request for authorization for a non-residential level of care (LOC) is being submitted for 30d/60d of service prior to the documentation of medical necessity. |
| 2F-2 | Bi-Directional Referrals for Low Barrier Care Claims Verified Claims | 2F-1 Bi-Directional Referral Executed MOUs | The CalOMS referral source field must include a ‘Harm Reduction Agency/Syringe Services’ category. When this is completed for patient admitted for care, the agency will be credited with having a verified Harm Reduction/Overdose prevention Hub Admissions (non FBS). |
| 2E-1 | Service Design | n/a | Submit 2E-1 Service Design Expectations and Invoice 2 if Start Up Funds not claimed. Contact Member_Services@ph.lacounty.gov with inquiries. |
| 2E-2 | Customer Walk Through | n/a | Submit 2E-2 Walk Through Summary Template with Invoice 2 if Start Up Funds not claimed. Contact Member_Services@ph.lacounty.gov with inquiries. |
| 2E-3 | Service Design Plan | n/a | Submit 2E-3 Service Design Plan with Invoice 2 Deliverable Based Efforts if Start Up Funds not claimed. Contact Member_Services@ph.lacounty.gov with inquiries. |
| AEFH | Assessing and Enhancing Financial Health | | |
| 3B-1 | AEFH Training with CIBHS | n/a | Submit attendance confirmation sent by CIBHS in March and Invoice 2 if Start-Up funds not claimed. |
| 3B-2 | Revenue/Expenditure Tracking Tool-Utilization | n/a | Submit 3B-2 Six-mos- Revenue.Expenditure Tracker |

Incentive Initiatives due June 30, 2024 with [Invoice 3: Incentive Verification](#) + Supporting Documentation

| Category # | Metric | Criteria/Calculation: | Reminder: |
|------------|---|---|--|
| WF | Workforce Development: | | |
| 1a | At least 40% of Certified Counselors | Calculate: Divide Total Certified by All Counselors delivering direct services according to NACT | Provider must update NACA Monthly – no separate submission required. Contact SAPC_NACT@ph.lacounty.gov |
| 1b | Minimum 1:15 LPHA to SUD Counselors ratio | Calculate: Divide total number of SUD Counselors by 15 to determine number of LPHAs required to receive incentive. | Provider must update NACA Monthly – no separate submission required. Contact SAPC_NACT@ph.lacounty.gov |
| R95 | Reaching the 95% | | |
| +2a | <u>Meet R95 Champion Criteria:</u> | <input type="checkbox"/> 2C-1 (Engagement Policy); <input type="checkbox"/> 2C-2 (Verified 30/60 Day Claims); <input type="checkbox"/> 2D-1 (Admission Policy); <input type="checkbox"/> 2D-2 Discharge Policy AND at least one other FULL Category: <input type="checkbox"/> 2A- 1, <input type="checkbox"/> 2, <input type="checkbox"/> 3- Engagement <input type="checkbox"/> 2B- 1, <input type="checkbox"/> 2- FBS <input type="checkbox"/> 2E- 1, <input type="checkbox"/> 2, <input type="checkbox"/> 3- Service Design <input type="checkbox"/> 2F- 1, <input type="checkbox"/> 2- Bi-Directional Referrals | Provider must submit Capacity Building Invoice #1 and/or #2 with supporting deliverables in each of these categories |
| MAT | Medications for Addiction Treatment | | |
| 3a | At least 50% of clients with OUD and/or AUD receive MAT education and/or Medication Services that include MAT* *OTP settings ensure 50% AUD receive AUD education and/or Medication Services that include MAT for AUD | Calculate: MAT/Medication Service Code ¹ and/or H2010M (MAT Education divided by Clients with OUD (F11*) and/or AUD (F10* diagnosis). ¹ Applicable MAT Service Codes: non-OTP settings: 90792, 99202-99205, 99212-99215, 99441-99443, H0034 and H2010M. Applicable MAT Service Codes: OTP Settings: S5001AB, S5001C, 90792, and H0034 specific to AUD medications. | SAPC's HODA team will add this metric to the existing monthly CalOMS Data Quality Report (DQR), starting in June. Contact hoda_caloms@ph.lacounty.gov for questions |
| 3b | At least 50% Clients Served agency-wide in this FY received naloxone | Calculate # of Clients that received naloxone ² (by Rx or via distribution documented in the record) at agency during FY by Total # of clients served. ² Applicable codes: Non- OTP H2010N; OTP- numerator codes are S5000D and S5001D with documentation. | SAPC's HODA team will add this metric to the existing monthly CalOMS Data Quality Report (DQR), starting in June. Contact hoda_caloms@ph.lacounty.gov for questions |

| Incentives Continued | | | |
|----------------------|---|---|---|
| Coord | Optimizing Care Coordination | | |
| 4a | At least 75% of clients served this FY have signed Release of Information (ROI) with internal (other SUD) or external (physical health, etc.) | Calculate: Divide Number of Clients with signed ROI form by total number of clients served this FY | For FY 23-24, all providers who submit an invoice indicating achievement will be reimbursed |
| 4b | 30% of clients during FY are referred and admitted to another level of SUD care within 30 days of discharge | Calculate: Number of Clients referred to other LOC at discharge by number of total number of Clients Discharged | SAPC's HODA team will add this metrics to the existing monthly CalOMS Data Quality Report (DQR), starting in May. Contact hoda_caloms@ph.lacounty.gov for questions |
| Data | Enhancing Data Reporting | | |
| 5a | At least 30% of CalOMS admission and discharge records agency-wide within this FY are submitted timely and 100% complete. | Calculate based on HODA Branch's Data Quality Report: Number of Admin and Discharge records 100% completed by # of ALL admission and discharge records submitted. | SAPC's HODA team have already added this metric to CalOMS Data Quality Report (DQR), which is available on the 15 th of each month. Contact hoda_caloms@ph.lacounty.gov for questions |

We kindly request submission to SAPC-CBI@ph.lacounty.gov by 11:59pm on June 30, 2024 with
 Subject Line: Agency Name CB- (list category #s 1C,2B, 2E, 3B) or
 Subject Line: Agency Name- Incentives (list category #s- example: 1a, 3b, 5a)

This is requested so that the various teams responsible for each category can expedite review of submissions.